

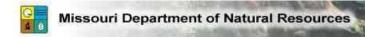
RECREATIONAL USE ATTAINABILITY ANALYSES PUBLIC COMMENTS

Public Comment Period May 21, 2008 – August 31, 2008

Bobs Creek WBID # 0035

Class C Lincoln County

Missouri Department of Natural Resources Water Protection Program PO Box 176 Jefferson City, MO 65102-0176 800-361-4827 / 573-751-1300



Stream Usage Survey

Stream Name (Please enter the full name) Bobs Creek		
2. County (Please enter the county or counties where the use occurs)	Lincoln	•
3. City or Town (Please enter city or town closest to the area of use)	Troy -	
4. Where do you use the stream? If use occurs in multiple locations, please list them all below. (Please be specific so the location can be identified on a map, e.g., 9th Street Bridge, Anytown City Park, Quarter Section-Township-Range, Latitude/Longitude, etc).		
Sections 11 & 14, T.49N R.1E.		
5. Have you or your family personally used the stream at this site(s) for	recreation since Nov. 28,	1975?
Yes If Yes, go to Question #6 No If No, go to Question No If No If No, go to Question No If No If No, go to Question No If No	estion #11	
6. Have you or your family personally used the stream at this site(s) for recreation activities? Please select all that apply:	any of the following whole	e body contact
Swimming Tubing Snorkling/Skin Diving	Water Skiing	
7. How many times per year have you or your family personally used th	e stream for these activiti	es? 6
8. Have you or your family personally used the stream at this site(s) for any of the following secondary contact recreation activities? Please select all that apply:		
Fishing Wading Boating Trap	pping	
9. How many times per year have you or your family personally used th	e stream for these activiti	es? 12
10. How many of these times did children wade or play in the stream?		
11. Have you observed or heard of others using the stream at this site(s) for recreation since Nov	. 28, 1975?
★ Yes If Yes, go to Question #12 No If No, go to Question #	estion #17	
12. Have you observed or heard of others using the stream at this site(s recreation activities? Please select all that apply:) for any of the following v	vhole body contact
Swimming Tubing Snorkling/Skin Diving	Water Skiing	
13. How many times per year have you observed or heard of others using	ng the stream for these ac	ctivities? 0
14. Have you observed or heard of others using the stream at this site(s recreation activities? Please select all that apply:) for any of the following s	secondary contact
Fishing Wading Boating Trap	pping	
15. How many times per year have you observed or heard of others usin	ng the stream for these ac	ctivities? 6
16. How many of these times did you observe or hear of children wading	g or playing in the stream?	? 0
17. Do you have additional comments you would like to provide the department.	artment regarding this stre	eam?
This is a private section of the stream. My family owns both sides of would have the opportunity to use it.	Bobs Creek. Only my fa	mily and invited guests
18. In the event the department has questions, please provide the follow	ring contact information:	
First Name: Faye Last Name:	Pavelka	
Address 1: 626 Ridge Road Address 2:		
City: Troy State: Missouri	Zip Code:	63379 -
Phone Number: (636) 462 - 4265 ext. E-mail: pfarm	ns@centurytel.net	